

TEEN PREGNANCY PREVENTION INITIATIVES MONITORING PLAN

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FY09 Monitoring Plan

Teen Pregnancy Prevention Initiatives

Program Overview

Teen Pregnancy Prevention Initiatives (TPPI) is a program of the North Carolina Department of Health and Human Services, Division of Public Health, Women's and Children's Health Section, Women's Health Branch, Family Planning and Reproductive Health Unit. TPPI provides four-year annually renewable grant awards to community agencies for local interventions. Local agencies may apply for funding for either a primary prevention program (i.e., prevention of first pregnancies) or for a secondary prevention program (i.e., prevention of repeat teen pregnancies).

TPPI-funded primary pregnancy prevention programs are called Adolescent Pregnancy Prevention Programs (APPP). This program is funded by Temporary Assistance to Need Families (TANF) and State Appropriation. Agencies funded to implement an APPP are strongly encouraged to choose from several evidence-based approaches to teen pregnancy prevention. These approaches may include various components including comprehensive sexuality education, parent involvement, service learning, academic assistance, individual counseling and cultural enrichment.

Agencies funded to implement secondary prevention programs must follow a specific intervention called the Adolescent Parenting Program (APP). This program is funded by Medical Assistance Administration and Training and State Appropriation. Program coordinators provide case management, advocacy services, and educational/support group meetings to teens who are pregnant or parenting for the first time. APP aims to help participants delay a subsequent pregnancy, complete a secondary education or G.E.D., avoid abuse and neglect of their children by promoting positive parenting techniques, utilize appropriate health care for self and child, and prepare for employment by learning job search and interview skills.

TPPI currently provides funding to more than 50 agencies including county public health departments, county departments of social services, school systems, and private non-profit agencies to implement either the Adolescent Parenting Program or the Adolescent Pregnancy Prevention Program.

In addition, funds for the Adolescent Pregnancy Prevention Campaign of North Carolina (APPCNC) are provided. The mission of APPCNC is to support North Carolina communities in preventing adolescent pregnancy through advocacy, collaboration, and education. APPCNC provides local, regional and statewide educational conferences, training and resource materials for professionals and conducts research and data analysis to facilitate prevention strategies.

Monitoring Process Overview

TPPI Program Managers utilize multiple methods for monitoring sub-recipients including the following:

- Quarterly review of programmatic reports (APPP only*)
- Quarterly review of TPPI database
- Monthly review of itemization reports
- Monthly review of contract expenditure reports
- Ongoing contact with sub-recipients by phone and email
- Annual on-site visit

* APPP grantees are required to submit process data in a quarterly programmatic report, while APP grantees enter process data into the TPPI database. The database is designed specifically for TPPI and is currently hosted by ITS. It stores extensive information on the participants being served and the services that are being provided to the participants.

Monitoring Schedule

See Attachment I for the FY09 Project Monitoring Log, which details the methods used for monitoring and the frequency of each. The planned dates for on-site visits of each sub-recipient are included on this document.

Guidelines for Monitoring

Scheduling On-site Visits:

Each on-site monitoring visit will include both a meeting with program staff and an observation of a program activity. For ease of schedule, on-site visits will be scheduled as far ahead of time as possible. In addition, it may be helpful to schedule APP visits before scheduling APPP visits as APP visits are more difficult to schedule for the following two reasons: 1) APP program sessions are held less frequently (usually bi-weekly or monthly). APPP program sessions are usually held several times per week so there are more choices for scheduling visits; and 2) the Regional Social Work Consultants (RSWC) of the Women's Health Branch will attend APP site visits and it can be difficult to find a date when the TPPI Program Manager, RSWC and sub-recipient program staff are available at the same time.

Preparation for On-site Visits:

At least one week prior to a scheduled site visit, the Site Visit Report Form (Attachment II and III) will be emailed to the program staff that will be present for the site visit meeting. This gives the staff an opportunity to gather documentation and information for the meeting. In addition, the Project Monitoring Log and TPPI database will be reviewed to assess the sub-recipient's compliance with the contract.

Materials Needed for On-site Visits:

The TPPI Program Manager will take a copy of the contract and the Site Visit Report Form to the on-site visit. Copies are not needed for the sub-recipient staff as they will make their own copies in preparation for the visit. For APP visits, a copy of the contract and Site Visit Report Form will be provided to the RSWC.

Conducting On-site Visits:

The Site Visit Report Form will be used as a guide for conducting the site visit. The program observation may take place either before or after the meeting with program staff. However, it is ideal to schedule the meeting after the observation so that any issues identified during the observation can be discussed during the meeting.

Writing the Site Visit Report:

The Site Visit Report Form will be completed as indicated on the form. The report will be emailed to the sub-recipient no later than 30 days after the on-site visit.

Monitoring Tools

Please see the attached FY09 Project Monitoring Log (Attachment I), the APPP FY09 Site Visit Report Form (Attachment II), and the APP FY09 Site Visit Report Form (Attachment III).

Monitoring Documentation

All documentation related to the monitoring of sub-recipients is stored electronically on the Women's Health Branch share drive. All documents submitted electronically by sub-recipients will be stored in an electronic folder at S:\Women's Health\TPPI\FY09 TPPI Contracts & Reports\Service Regions and Reports. The Project Monitoring Log will be stored in an electronic folder at S:\Women's Health\TPPI\Monitoring Logs. All report templates will be stored in an electronic folder at S:\Women's Health\TPPI\Monitoring Materials\Site Visit Report Forms. Contract Expenditure Reports and any other documentation that is submitted on hardcopy will be maintained in the project binders, which will be stored in the TPPI Program Manager's office.

Follow-up on Significant Findings

If significant issues are identified during an on-site visit, a corrective action plan will be developed, including action steps and dates for completion, and a follow meeting will be held to assess the completion of the action steps.

[illegible]

Haywood County Schools		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: V. Meadows	CER											
	IR											
	QR											
	database											
	Evaluation											
	SV Scheduled	9/9/2008										
	SV Report											
Lee County Coalition for Families		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: T. Hall	CER											
	IR											
	QR											
	database											
	Evaluation											
	SV Scheduled										5/15/2009	
	SV Report											
Mount Zion Community Development Corp.		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: V. Meadows	CER											
	IR											
	QR											
	database											
	Evaluation											
	SV Scheduled				10/3/2008							
	SV Report											
One on One		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: R. Crownover	CER											
	IR											
	QR											
	database											
	Evaluation											
	SV Scheduled							3/16/2009				
	SV Report											
Planned Parenthood (Cumberland)		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: T. Hall	CER											
	IR											
	QR											
	database											
	Evaluation											
	SV Scheduled							2/20/2009				
	SV Report											
Scotland County Partnership for Children		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: T. Hall	CER											
	IR											
	QR											
	database											
	Evaluation											
	SV Scheduled							2/19/2009				
	SV Report											

[illegible]

Health Departments – AP3:

QR = Date of Receipt of Quarterly Program Report

Database = Date & Status (up to date or past due) of Data Entry

Evaluation = Date of Receipt of Outcome Evaluation Surveys

SV Scheduled = Date Site Visit Scheduled or Conducted

SV Report = Date Site Visit Report Completed

Durham County Health Department		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: T. Hall	QR												
	database												
	Evaluation												
	SV Scheduled				10/10/2008								
	SV Report												
Gaston County Health Department		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: V. Meadows	QR												
	database												
	Evaluation												
	SV Scheduled				9/12/2008								
	SV Report												
Jackson County Health Department		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: V. Meadows	QR												
	database												
	Evaluation												
	SV Scheduled										4/10/2009		
	SV Report												
Jones County Health Department		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: R. Crownover	QR												
	database												
	Evaluation												
	SV Scheduled				10/22/2009								
	SV Report												
Mecklenburg County Health Department		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: V. Meadows	QR												
	database												
	Evaluation												
	SV Scheduled										5/18/2009		
	SV Report												
Wake County Human Services		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: T. Hall	QR												
	database												
	Evaluation												
	SV Scheduled				9/30/2008								
	SV Report												

Non-Health Departments & DSS – AP2:

CER = Date of Receipt of Contract Expenditure Report

IR = Date of Receipt of Itemization Report

Database = Date & Status (up to date or past due) of Data Entry

SV Scheduled = Date Site Visit Scheduled or Conducted

SV Report = Date Site Visit Report Completed

Anson County Partnership for Children Program Manager: V. Meadows		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
								2/27/2009				
Beaufort County Schools Program Manager: R. Crownover		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
		12/9/2008										
Catholic Social Services Program Manager: V. Meadows		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
		11/3/2008										
CIS of Mecklenburg Program Manager: V. Meadows		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
											5/26/2009	
CIS of Thomasville Program Manager: V. Meadows		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
		10/13/2008										
Crisis Pregnancy Center of Gaston County Program Manager: V. Meadows		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
		12/15/2008										
Exchange Club of Alamance County Program Manager: T. Hall		2008						2009				
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
											5/8/2009	
FGV Partnership		2008						2009				

[illegible]

V. Meadows

2008						2009				
Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May

Program Manager:
T. Hall

[illegible]

Program Manager:
T. Hall

Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
									5/31/2009	

CER = Date of Receipt of Contract Expenditure Report
IR = Date of Receipt of Itemization Report
Database = Date & Status (up to date or past due) of Data Entry
SV Scheduled = Date Site Visit Scheduled or Conducted
SV Report = Date Site Visit Report Completed

		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Caldwell County DSS													
Program Manager: V. Meadows	CER												
	IR												
	database												
	SV Scheduled							12/19/2008					
	SV Report												
Henderson County DSS/CFRC													
Program Manager: V. Meadows	CER												
	IR												
	database												
	SV Scheduled							2/19/2009					
	SV Report												
Onslow County DSS													
Program Manager: R. Crownover	CER												
	IR												
	database												
	SV Scheduled							11/10/2008					
	SV Report												
Orange County DSS													
Program Manager: T. Hall	CER												
	IR												
	database												
	SV Scheduled							11/14/2008					
	SV Report												

Health Departments – AP2:

Database = Date & Status (up to date or past due) of Data Entry

SV Scheduled = Date Site Visit Scheduled or Conducted

Burke County Health Department		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: V. Meadows	database												
	SV Scheduled	8/15/2008											
	SV Report												
Cabarrus Health Alliance		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: V. Meadows	database												
	SV Scheduled							2/27/2009					
	SV Report												
Chatham County Health Department		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: T. Hall	database												
	SV Scheduled							12/8/2008					
	SV Report												
Hertford County Public Health Authority		2008						2009					
		Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Program Manager: R. Crownover	database												
	SV Scheduled							2/9/2009					
	SV Report												

Attachment II

FY2009 Site Visit Report

Adolescent Pregnancy Prevention Program

Agency:

County:

Program Staff Present:

DPH Staff Present:

Date of Site Visit:

Date of Report:

Rate each section below using the following scale:

E = Excellent VG = Very Good G = Good NI = Needs Improvement P = Poor

General Agency Policies & Procedures				
Programmatic				Rating:
	Yes	No	N/A	Comments
1. A copy of the contract between the agency and DHHS is available.				
2. The agency's program personnel are familiar with the contract's requirements.				
3. Written personnel policies and procedures are in place.				
4. Performance appraisals are conducted for all employees.				
5. Key staff of this agency have been in place for at least one year.				
6. Representatives of the agency's Board of Directors meet regularly with the lead administrator.				
7. Written policies exist regarding the training and supervision of volunteers.				
8. Written policies exist regarding the use of consultants/subcontractors.				
9. Procedures for monitoring the performance of consultants/subcontractors exist.				
10. Written policies exist regarding confidentiality of client records or databases.				

11. Client satisfaction surveys are utilized.				
12. A policy for addressing client grievances exists.				
13. A code of conduct exists and is applicable to all employees.				
14. Public policy requirements specified in the agency's contract have been met (e.g., drug free, smoke free, etc.)				
Financial				Rating:
15. The agency's fiscal officer is familiar with the Contract Budget page.				
16. Written accounting procedures are set out in an accounting manual.				
17. A written policy for purchase request, approval, receipt and payment exists.				
18. The policy clearly identifies who may approve purchases.				
19. The policy clearly identifies who may approve payments.				
20. Two signatures are required on checks for payment.				
21. Purchases are documented with purchase request, approval, receipt, payment and allocation documents.				
22. Property records are on file for all items with a useful life of more than one year and a purchase price of \$500 or more.				
23. Time sheets are maintained for all employees.				
24. Written procedures exist for appropriate allocation of personnel expense.				
25. Backup, source documents are available for expenditure reports.				
26. Categorical expenditures are in accordance with the approved Contract Budget.				
27. Required prior approvals are requested and obtained before making budgetary and programmatic revisions.				
28. Indirect/overhead costs are consistently applied throughout the agency.				
29. Copies of annual audits and/or financial statements are on file.				
30. Vendors are reviewed by a responsible official to identify potential conflict of interest situations.				

APPP Contract Requirements	
Contract Objective #1: Program Staffing	Rating:
<p>The contractor shall employ at least one staff person who has appropriate qualifications, training and experiences to assume responsibility for the implementation of the adolescent pregnancy prevention program.</p>	
Comments	
Contract Objective #2: Submission of Reports	Rating:
<p>The contractor shall comply with DHHS reporting requirements including submission of Contract Expenditure Reports by mail and Itemization Reports by email to the TPPI Program Manager on a monthly basis and no later than the 10th of the following month. Program Progress Reports shall be submitted on a quarterly basis as specified on the following schedule:</p> <ul style="list-style-type: none"> • July–September report due October 10, 2008 • October–December report due January 10, 2009 • January–March report due April 10, 2009 • April–May report due June 10, 2009 	
Comments	
Contract Objective #3: Data Entry	Rating:
<p>The contractor shall enter required data in the TPPI database within 30-days of the activity. If 59 or fewer participants are served, the contractor shall enter data in the individual section of the database as well as complete the individual section of the monthly progress report. If 60 or more participants are served, the contractor shall enter data in the group section of the database.</p>	
Comments	

Contract Objective #4: Outcome Evaluation	Rating:
<p>The contractor shall meet the following outcome evaluation requirements:</p> <ul style="list-style-type: none"> • Recruit and maintain comparison group of at least 20 members; • Administer pre-test to each new participant upon entry into the program and to all comparison group members in accordance with the Evaluation Plan developed in collaboration with the TPPI Evaluation Consultant; • Submit completed participant and comparison group pre-tests to the TPPI Evaluation Consultant by December 15, 2008; • Administer post-tests to participants and comparison group members in accordance with the Evaluation Plan developed in collaboration with the TPPI Evaluation Consultant; and • Submit completed participant & comparison group post-tests to the TPPI Evaluation Consultant by June 15, 2009. 	
Comments	
Contract Objective #5: Community Advisory Council	Rating:
<p>The contractor shall maintain a Community Advisory Council (CAC) that includes the community partners that are required by the TPPI legislative rules (NCAC 10A, Chapter 43, Section .0804) based on the contractor's level of funding. Membership may include representation from the local health department, the local public school system, the local social services department, the local mental health authority, local corporations and businesses, media, and other local organizations that serve youth. The CAC will be responsible for advising program staff on program policies and procedures and for reviewing and approving all educational and promotional materials developed by the local project. The CAC will meet at least four times per year. The Program Coordinator will maintain a CAC membership list, meeting attendance lists and meeting minutes.</p>	
Comments	
Contract Objective #6: Community Collaboration	Rating:
<p>The contractor shall define and maintain cooperative ties with other community institutions in order to meet the needs of program participants and reduce teen pregnancy rates among the targeted population.</p>	
Comments	

Contract Objective #7: Financial Support	Rating:
<p>The contractor shall demonstrate its ability to attract financial support from sources other than the TPPI funds, including sources in the local community.</p>	
Comments	
Contract Objective #8: Eliminating Health Disparities	Rating:
<p>The contractor shall participate in ongoing efforts that promote the reduction of racial, ethnic, or socio-economic health disparities among program participants and within the targeted community. Activities may involve academic support, career promotion, work skills promotion, cultural enrichment, and/or access to essential health care services.</p>	
Comments	
Contract Objective #9: Attendance at Required Events	Rating:
<p>Staff of this adolescent pregnancy prevention program will attend a fall regional meeting, a spring regional meeting and the annual pregnancy prevention conference. All Projects receiving TPPI funds for the first time will attend a new project orientation training.</p>	
Comments	

Project Specific Objectives (#10 and higher):	Rating :
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The contractor is implementing an evidence-based or promising approach to teen pregnancy prevention with fidelity and is on target to meet all of the project-specific objectives as outlined in the current contract.

Comments

Observation of Program Session:	Rating :
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The topic of the observed program session was appropriate and relevant; the information presented was factual; and the program facilitator(s) provided services in a caring, respectful manner in an effort to create an environment where participants were comfortable sharing their values and beliefs and practicing skills that will improve their health.

Comments

Additional Comments:

Attachment III

FY2009 Site Visit Report

Adolescent Parenting Program

Agency:

County:

Program Staff Present:

DPH Staff Present:

Date of Site Visit:

Date of Report:

Rate each section below using the following scale:

E = Excellent VG = Very Good G = Good NI = Needs Improvement P = Poor

General Agency Policies & Procedures				
Programmatic				Rating:
	Yes	No	N/A	Comments
1. A copy of the contract between the agency and DHHS is available.				
2. The agency's program personnel are familiar with the contract's requirements.				
3. Written personnel policies and procedures are in place.				
4. Performance appraisals are conducted for all employees.				
5. Key staff of this agency have been in place for at least one year.				
6. Representatives of the agency's Board of Directors meet regularly with the lead administrator.				
7. Written policies exist regarding the training and supervision of volunteers.				
8. Written policies exist regarding the use of consultants/subcontractors.				
9. Procedures for monitoring the performance of consultants/subcontractors exist.				
10. Written policies exist regarding confidentiality of client records or databases.				

11. Client satisfaction surveys are utilized.				
12. A policy for addressing client grievances exists.				
13. A code of conduct exists and is applicable to all employees.				
14. Public policy requirements specified in the agency's contract have been met (e.g., drug free, smoke free, etc.)				
Financial				Rating:
15. The agency's fiscal officer is familiar with the Contract Budget page.				
16. Written accounting procedures are set out in an accounting manual.				
17. A written policy for purchase request, approval, receipt and payment exists.				
18. The policy clearly identifies who may approve purchases.				
19. The policy clearly identifies who may approve payments.				
20. Two signatures are required on checks for payment.				
21. Purchases are documented with purchase request, approval, receipt, payment and allocation documents.				
22. Property records are on file for all items with a useful life of more than one year and a purchase price of \$500 or more.				
23. Time sheets are maintained for all employees.				
24. Written procedures exist for appropriate allocation of personnel expense.				
25. Backup, source documents are available for expenditure reports.				
26. Categorical expenditures are in accordance with the approved Contract Budget.				
27. Required prior approvals are requested and obtained before making budgetary and programmatic revisions.				
28. Indirect/overhead costs are consistently applied throughout the agency.				
29. Copies of annual audits and/or financial statements are on file.				
30. Vendors are reviewed by a responsible official to identify potential conflict of interest situations.				

APP Contract Requirements

Contract Objective #1: Program Staffing

Rating:

The contractor shall employ at least one full-time staff person who has appropriate qualifications, training and experiences to assume responsibility for the implementation of the Adolescent Parenting Program.

Comments

Contract Objective #2: Data Entry

Rating:

The contractor shall enter required data in the TPPI database within thirty days of the activity. Database forms to be completed will include the intake form, individual service forms, group activity forms, goal plan forms, and case closure forms.

Comments

Contract Objective #3: Documentation on File

Rating:

The contractor shall maintain hardcopy files of the parental release form and documentation of Medicaid eligibility for each program participant.

Comments

Contract Objective #4: Community Advisory Council	Rating:
<p>The contractor shall maintain a Community Advisory Council (CAC) that includes the community partners that are required by the TPPI legislative rules (NCAC 10A, Chapter 43, Section .0804) based on the contractor's level of funding. Membership may include representation from the local health department, the local public school system, the local social services department, the local mental health authority, local corporations and businesses, media, and other local organizations that serve youth. The CAC will be responsible for advising program staff on program policies and procedures and for reviewing and approving all educational and promotional materials developed by the local project. The CAC will meet at least four times per year. The Program Coordinator will maintain a CAC membership list, meeting attendance lists and meeting minutes.</p>	
Comments	
Contract Objective #5: Community Collaboration	Rating:
<p>The contractor shall define and maintain cooperative ties with other community institutions in order to meet the needs of program participants.</p>	
Comments	
Contract Objective #6: Financial Support	Rating:
<p>The contractor shall demonstrate its ability to attract financial support from sources other than the TPPI funds, including sources in the local community.</p>	
Comments	

Contract Objective #7: Eliminating Health Disparities	Rating:
<p>The contractor shall participate in ongoing efforts within the existing scope of APP activities that promote the reduction of racial, ethnic, or socio-economic health disparities among program participants and within the targeted community. Activities may involve academic support, career promotion, work skills promotion, cultural enrichment, and/or access to essential health care services.</p>	
Comments	
Contract Objective #8: Professional Development	Rating:
<p>The APP coordinator shall complete at least eighteen hours annually of professional development training aimed at improving program outcomes. This training will include attendance at the following: a fall APP regional meeting, a spring APP regional meeting, the annual pregnancy prevention conference, and the APP graduation conference. All contractors receiving TPPI funds for the first time will attend a new project orientation training.</p>	
Comments	
Contract Objective #9: Caseload & Participant Eligibility	Rating:
<p>The contractor shall serve 12-20 teen parents who reside within the contractor's county or catchment area and who are currently pregnant or parenting one child, under the age of 18 at the time of APP enrollment, enrolled in school or an equivalent program, and eligible for Medicaid. <i>APP services may not be provided to individuals who do not meet these criteria unless additional funds are secured to hire staff to serve these individuals.</i></p>	
Comments	

Contract Objective #10: Peer Group Meetings	Rating :
<p>The contractor shall provide at least ten peer group meetings annually to program participants. These meetings will focus on delaying a second pregnancy, completing a secondary education, improving parenting skills, preparing for employment, utilizing healthcare, and other issues that are important to teen parents and their children.</p>	
Comments	
Contract Objective #11: Case Management Services	Rating :
<p>The contractor shall provide case management services for each program participant. The APP goal plan, which should be completed within 45 days after a participant is enrolled in APP, will be used to guide case management services. The APP coordinator will support the participants and connect them with resources as appropriate to meet the goals of the goal plan. The APP coordinator will review and update the goal plan with each participant every six months. Case management services will include providing at least one face-to-face meeting per month with each program participant for a total of 12 per year. These face-to-face meetings may take place in school, the APP office or another appropriate setting.</p>	
Comments	
Observation of Program Session:	Rating :
<p>The topic of the observed program session was appropriate and relevant; the information presented was factual; and the program facilitator(s) provided services in a caring, respectful manner in an effort to create an environment where participants were comfortable sharing their values and beliefs and practicing skills that will improve their health.</p>	
Comments	

Additional Comments: